ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY



W-02518A Q Mountain Mobile Home Park PO Box 4930 Ouartzsite, AZ 85359



V CORF COMM

ANNUAL REPORT

FOR YEAR ENDING

12 31 2006

FOR COMMISSION USE

ANN 04

06

PROCESSED BY:

SCANNED

COMPANY INFORMATION

Mailing Address PO BOX 4930		
(Street)		
QUARTZSITE	AZ	85359
(City)	(State)	(Zip)
928-927-3088	928-927-3088	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address		4
Local Office Mailing Address PO BOX	1930	
(Str	eet)	
	AZ	85359
QUARTZSITE		(Zip)
QUARTZSITE (City)	(State)	(=
	(State) 928-927-3088	(=-,-,-

MANAGEMENT INFORMATION

Management Contact:	ROBERT 1	KELLEY			PR	ESIDENT	
		(Name)		<u>-</u>		(Title)	
PO BOX 4930		QUARTZSITE			AZ	85359	
(Street)		(City)			(State)		(Zip)
928-927-3088		928-927	-3088	•			
Telephone No. (Include Area Code)		Fax No. (Include A	rea Code))	Pager/C	Cell No. (Inc.	lude Area Code)
Email Address					·		
Email Address		<u> </u>					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	B. BYRD						
Email AddressOn Site Manager: JAMES	B. BYRD	(Name)	-				
On Site Manager: JAMES	B. BYRD	(Name)	AZ	85359			
On Site Manager: JAMES		(Name)	AZ	85359	(State)		(Zip)
On Site Manager: JAMES PO BOX 4930 QUI (Street)		(Name)		85359	(State)		(Zip)
On Site Manager: JAMES PO BOX 4930 QUA		(Name) (City)	088			cell No. (Inci	(Zip) sude Area Code)
On Site Manager: JAMES PO BOX 4930 QUA (Street) 928-927-3088		(Name) (City) . 928-927-3	088			cell No. (Inci	

[[]X] Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: JOHN CHURCH	TLL (Name)		
	•	ΑZ	85344
1300 JOSHUA AVE	PARKER (City)	(State)	(Zip)
(Street)	* **	, ,	
928-669-6195 Telephone No. (Include Area Code)	928-669-5376 Fax No. (Include Area Code	Pager/Cel	l No. (Include Area Code)
relephone 146. (Metade Alea Code)	2 2000		
Attorney: EKMARK & EKMA	ARK (Name)		
	SCOTTSDALE	AZ	85253
6720 NORTH SCOTTSDALE RD (Street)	(City)	(State)	(Zip)
480-922-9292	480-922-9422	ن د	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Ce	ll No. (Include Area Code)
Check the following box that applies t	o your company:	<u>UN</u>	
Sole Proprietor (S)	C Corporation	(C) (Other than	Association/Co-op)
Partnership (P)	Subchapter S C	orporation (Z)	
☐ Bankruptcy (B)	Association/Co-	op (A)	
Receivership (R)	Limited Liabili	ty Company	
Other (Describe)			
	COUNTIES SERVED		
Check the box below for the county/ie	es in which you are certificated to	provide service:	
П АРАСНЕ	COCHISE		ONINO
☐ GILA	GRAHAM .	GREE	NLEE
X LA PAZ	☐ MARICOPA	□ мон	AVE
☐ NAVAJO	☐ PIMA	☐ PINAI	
SANTA CRUZ	☐ YAVAPAI	☐ YUMA	1
☐ STATEWIDE			

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS			

This amount goes on the Balance Sheet Acct. No. 108

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization		-	
302	Franchises			
303	Land and Land Rights	\$5,661.00	.405	23
304	Structures and Improvements	\$4,140.00	.405	17
307	Wells and Springs	\$29,733.00	.405	120
311	Pumping Equipment	\$10,751.00	.405	44
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes	\$8,910.00	.405	36
331	Transmission and Distribution Mains	\$30,902.00	.405	126
333	Services	\$3,565.00	.405	14
334	Meters and Meter Installations	\$3,250.00	.405	13
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	\$96,912.00		393

This amount goes on the Comparative Statement of Income and Expense ______ Acct. No. 403.

BALANCE SHEET

Acct		BALANCE AT	BALANCE AT
.No.		BEGINNING OF YEAR	END OF
	ASSETS	YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$71,324.00	\$139,435.00
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS		
		\$71,324.00	\$139,435.00
	FIXED ASSETS		
101	Utility Plant in Service	\$96,912.00	\$96,912.00
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant	\$96,519.00	\$96,912.00
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$393.00	\$ 0
	TOTAL ASSETS	\$71,717.00	\$139,435.00

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	LIABILITIES	YEAR	YEAR
	CURRENT LIABILITES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$41,095.00	\$-0
		,	
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax	reven	
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$41,095.00	\$ - 0
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings	\$30,622.00	\$139,435.00
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$ 30,622.00	\$ 139,435.00
3.40	TOTAL LIABILITIES AND CAPITAL	\$ 71,717.00	\$ 139,435.00

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$14,149.00	\$ 30,851.00
460	Unmetered Water Revenue		
474	Other Water Revenues	\$33,580.00	\$21,012.00
	TOTAL REVENUES	\$47,729.00	\$ 51,863.00
	OPERATING EXPENSES		
601	Salaries and Wages	\$12,343.00	\$4,623.00
610	Purchased Water		
615	Purchased Power	\$5,270.00	\$5,939.00
618	Chemicals		
620	Repairs and Maintenance	\$2,789.00	\$3,828.00
621	Office Supplies and Expense	\$651.00	\$727.00
630	Outside Services	\$1,063.00	\$10,526.00
635	Water Testing	\$2,181.00	\$2,662.00
641	Rents	\$751.00	\$1,660.00
650	Transportation Expenses	\$630.00	\$60.00
657	Insurance – General Liability		
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense	\$2,831.00	\$9,301.00
403	Depreciation Expense	\$6,436.00	\$393.00
408	Taxes Other Than Income	\$1,981.00	\$3,750.00
408.11	Property Taxes		\$2,545.00
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$36,926.00	\$46,014.00
	OPERATING INCOME/(LOSS)	\$10,803.00	\$5,849.00
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$124.00	\$861.00
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/(EXPENSE)	\$124.00	\$861.00
	NET INCOME/(LOSS)	\$10,927.00	\$6,710.00

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOA	N #2 LO.	AN #3 I	OAN #4
Date Issued NONE					
Source of Loan				:	···
ACC Decision No.					
Reason for Loan					
Dollar Amount Issued	\$	\$	\$	\$	
Amount Outstanding	\$	\$	\$	\$	
Date of Maturity					
Interest Rate		%	%	%	%
Current Year Interest	\$	\$	\$	\$	
Current Year Principle	\$	\$	\$	\$	

Meter Deposit Balance at Test Year End	\$ NONE
Meter Deposits Refunded During the Test Year	\$ NONE

COMPANY NAME	Q MOUNTAIN MOBILE HOME PARK
Name of System	ADEQ Public Water System Number (if applicable)

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
I 55509291	7 1/2	250	150	6	3/4	1988
55509282	7 1/2	250	150	6	3/4	1988
55512584	7 1/2	250	70	6	3/4	1990
5551512583	7 1/2	250	70	6	3/4	1990

^{*} Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
NONE		

BOOSTER PUMPS		FIRE HYDRANTS		
Horsepower	Quantity	Quantity Standard	Quantity Other	
NONE				

STORAGE TA	NKS	PRESSU	RE TANKS
Capacity	Quantity	Capacity	Quantity
20,000 GAL	4	4,000 GAL	2

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	Q MOUNTAIN MOBILE HOME PARK
Name of System	ADEQ Public Water System Number (if applicable)

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS	
-------	--

Size (in inches)	Material	Length (in feet)
2	#80 PVC	2,690
3		
4	#80 PVC	9,440
5		
66	#80 PVC	3,665
8		
10		
12		
-		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X ³ / ₄	_
3/4	219
1	_
1 1/2	_
2	_
Comp. 3	_
Turbo 3	_
Comp. 4	_
Tubo 4	_
Comp. 6	_
Tubo 6	_

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:	
<u> </u>	NONE
×	
STRUCTURES:	NONE
OTHER:	
	FOUR - 20,000 GALLON STORAGE TANKS
	TWO - 4,000 GALLON PRESSURE TANKS
The state of the s	FOUR - 7 1/2 HP BOOSTER PUMPS
	TOOK - / 1/2 OF BOOSTER PUMPS

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	Q MOUNTAIN MOBILE HOME PARK
Name of System	ADEQ Public Water System Number (if applicable)

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2006

MONTH/YEAR	NUMBER OF CUSTOMERS	GALLONS SOLD	GALLONS PUMPED	GALLONS PURCHASED
		(Thousands)	(Thousands)	(Thousands)
JANUARY	217	718,322		
FEBRUARY	212	583,422		
MARCH	210	615,111		,
APRIL	212	709,695		
MAY	210	669,874		
JUNE	210	718,590	***	
JULY	211	894,620		
AUGUST	207	706,960		
SEPTEMBER	209	588,140		
OCTOBER	213	672,670		
NOVEMBER	218	797,001		
DECEMBER	219	554,469		
	$TOTALS \longrightarrow$	8,228,874		

	f arsenic for each well on your system? please list each separately.)	mg/l
If system has fire h	ydrants, what is the fire flow requirement?	GPM forhrs
If system has chlor () Yes	ination treatment, does this treatment system () No	chlorinate continuously?
Is the Water Utility () Yes	v located in an ADWR Active Management Ar () No	rea (AMA)?
Does the Company () Yes	have an ADWR Gallons Per Capita Per Day (() No	(GPCPD) requirement?
If yes, provide the (GPCPD amount:	

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME Q MOUNTAIN MOBILE HOME PARK	YEAR ENDING 12/31/2006
PROPERTY TAXES	
Amount of actual property taxes paid during Calendar Year 2006 was: \$2	2,545.31
Attach to this annual report proof (e.g. property tax bills stamped "paid in property tax payments) of any and all property taxes paid during the calen	
If no property taxes paid, explain why	<u> </u>

VERIFICATION AND SWORN STATEMENT Taxes

Al		11 10
A)	ox a a	IVED

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

	AZ CORPO	2007
OUNTY OF (COUNTY NAME)	DIRECTATION	<u> ۲٬</u>
LA PAZ	ACTOR TON	2011.
NAME (OWNER OR OFFICIAL) TITLE JERRY HIBBARD PRESIDENT	"OFU	TILITIES ON
COMPANY NAME Q MOUNTAIN MOBILE HOME PARK		1.28
& MONTHLY HOUTER HOUR THINK		

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

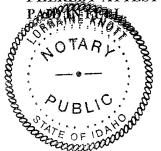
MONTH	DAY	YEAR
12	31	2006

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND



JETHY E NAMED OF OFFICIAL

ZOS 87/ 1546

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

30

DAY OF

COUNTY NAME

,2007

(SEAL)

MY COMMISSION EXPIRES \\-

SIGNATURE OF NOTARY PUBLIC

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported Estimated or Actual Federal Tax Liability	\$1,335.00 \$401.00
State Taxable Income Reported Estimated or Actual State Tax Liability	\$1,335.00 \$93.00
Amount of Grossed-Up Contributions/Advances:	
Amount of Contributions/Advances	0
Amount of Gross-Up Tax Collected	0
Total Grossed-Up Contributions/Advances	0

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

SIGNATURE

PRINTED NAME

 $\frac{3U^-O}{\text{DATE}}$

ים זידוים

VERIFICATION AND

SWORN STATEMENT

VERIFICATION	
STATE OF	ARIZONA

I, THE UNDERSIGNED

OF THE

VERIFICATION AND SWORN STATEMENT Intrastate Revenues Only	AZCORPO AZCOR
COUNTY OF (COUNTY NAME) LA PAZ	UIRECTON CO.
NAME (OWNER OR OFFICIAL) TITLE JERRY HIBBARD , VICE PRESI	DENT OF UTILL TIES
COMPANY NAME O MOUNTAIN MOBILE HOME PA	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

VEAR DAY MONTH FOR THE YEAR ENDING 2006 12

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2006 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$) \$51,863.00

(THE AMOUNT IN BOX ABOVE INCLUDES \$ 4,406.16 IN SALES TAXES BILLED, OR COLLECTED)

**REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

END FOR THE COUNTY OF

DAY OF

TELEPHONE NUMBER

COUNTY NAME ,20 07 MONTH

VERIFICATION SWORN STATEMEN I RESIDENTIAL REVENUE Therastate Revenues Only ORPORATION COMMISSION OF LITHLINES

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) LA PAZ

COMPANY NAME

NAME (OWNER OR OFFICIAL) JERRY HIBBARD

WICE PRESIDENT

DIRECTOR OF WILLITIES

RECEIVEL

O MOUNTAIN MOBILE HOME PARK

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

YEAR MONTH DAY 2006 12 31

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY: THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2006 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

\$51,863.00

THE AMOUNT IN BOX AT LEFT INCLUDES \$ 4,406.16

IN SALES TAXES BILLED, OR COLLECTED)

*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

30

DAY OF

NOTARY PUBLIC NAME

Lorra me COUNTY NAME

.20 07

COMMISSION EXPIRES

11-27-07

SIGNATURE OF NOTARY

17